



## City of Bellevue Parks & Community Services

# Winter 2013 Volleyball League

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### LEAGUE INFORMATION:

- **10** matches total, one match per week.
- Sunday evenings.
- Gyms at Bellevue Community College, Tye Community Gym, and South Bellevue Community Center.
- Format: 6-on-6, **Co-Rec** (any combination of men &/or women, women not required).
- Self-Officiated. **Required:** Teams to provide 2 players to officiate assigned matches.
- USAV rules with house modifications – see league rules: [http://bellevuewa.gov/pdf/parks/2012\\_vb\\_rules.pdf](http://bellevuewa.gov/pdf/parks/2012_vb_rules.pdf)

### LEAGUES OFFERED:

- **AA** – Highly competitive. Spiking and blocking continually; experienced players/teams; sophisticated and aggressive defense.
- **A** - Skilled teams with full knowledge of the game.
  - **A Upper** - Very competitive
  - **A Lower** - Competitive.
- **B** – Recreation level play emphasizing skill growth. Not for beginners.
- **Notes**
  - The league administrator reserves the right to place teams into any division deemed necessary for league play.
  - New teams are recommended to sign up for the B League.
  - Teams automatically move up after winning their league.
  - Individuals can be placed on the Interested Players List. Contact Shirley Louie at (425)452-4479, [slouie@bellevuewa.gov](mailto:slouie@bellevuewa.gov).

### IMPORTANT DATES:

- **Mon Nov 5, 2012** – Registration opens for Bellevue residents & returning teams.
- **Mon Nov 12, 2012** –Registration open for everyone.
- **Fri Nov 30, 2012 4:30 pm** - Registration & Payment Deadline
- **January 6 – March 31, 2013** - League Play

### COSTS:

- League Fee: **\$375** per team  
*Nonrefundable if requested less than 3 weeks prior to start of league play. \$10 administrative fee if refund granted.*
- Non-resident Fee: **\$10** each player **not residing** in Bellevue (zip codes 98004-98008)

### REGISTRATION REQUIREMENTS:

- Registration Form
- Team Roster **with residence addresses**  
*(Online Registration: roster due 3<sup>rd</sup> week of games along with final changes)*
- Full League Fee.  
*(Company Sponsorship: credit card number required – will be charged if sponsorship check is not received by the 1<sup>st</sup> game)*
- Non-Resident Fees, if applicable

### PAYMENT OPTIONS:

- Cash, Checks, Visa, and MasterCard accepted.

## REGISTRATION OPTIONS:

- Online Registration <http://parksreg.bellevuewa.gov>
- Drop-Off Location: Bellevue City Hall  
Service First Desk  
450 110<sup>th</sup> Ave NE  
Bellevue, WA 98004
- Mailing Address: Shirley Louie  
Bellevue Parks/Enterprise Division  
PO Box 90012  
Bellevue, WA 98009-9012
- E-mail Address: [slouie@bellevuewa.gov](mailto:slouie@bellevuewa.gov)
- Fax: (425) 452-7221 Attn: Shirley Louie

## FOR MORE INFORMATION:

Bellevue Parks & Community Services Department:

- League Coordinator: Shirley Louie - (425) 452-4479, [slouie@bellevuewa.gov](mailto:slouie@bellevuewa.gov)
- League Administrator: Jon Wilson – (425) 452-4278, [jwilson@bellevuewa.gov](mailto:jwilson@bellevuewa.gov)

City of Bellevue websites

- [http://bellevuewa.gov/parks\\_adult\\_sports\\_leagues.htm](http://bellevuewa.gov/parks_adult_sports_leagues.htm)
  - <http://parksreg.bellevuewa.gov>
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Fall [ ] Winter [✓] Spring [ ]		Year [2013]
Team Name:		Sponsor (if applicable):
Manager's Name:		Phone: (cell) (day) (evening)
Street Address:		Fax:
City, State, Zip:		Email Address:
League Preference: <input type="checkbox"/> AA <input type="checkbox"/> A Upper <input type="checkbox"/> A Lower <input type="checkbox"/> B <input type="checkbox"/> Womens – <b>NEW</b> use Women's VB League forms		Payment Enclosed (check all that apply):  <div> <input type="checkbox"/> <b>\$375</b> Team League Fee  <i>Nonrefundable if requested less than 3 weeks prior to start of league play. \$10 administrative fee if refund granted.</i> </div> <div> <input type="checkbox"/> Non-Resident Fees, if applicable (\$10 each)         </div> <div> <input type="checkbox"/> Total Enclosed         </div>
Type of Payment: <input type="checkbox"/> Cash (Do not send in mail) <input type="checkbox"/> Check or money order (payable to "City of Bellevue") <input type="checkbox"/> Company Sponsor Check – <b>credit card# required</b> – will be charged if sponsorship check not received by 1 <sup>st</sup> game. <input type="checkbox"/> Charge Card (check type): <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard		
Account #:		Expiration Date:
Is your team new to the City of Bellevue Volleyball League? _		
If it is, how did you find out about our league?		
If not, what season did your team play in last?		
Season:	Year:	Former team name:

[illegible]



## City of Bellevue Parks & Community Services

# Winter 2013 Volleyball League

### Injury/Liability Release Form and Roster

I, the undersigned participant on TEAM: \_\_\_\_\_, have voluntarily agreed to participate in the City of Bellevue Parks and Community Services Fall[ ☐ ] Winter[ ☒ ] Spring[ ☐ ] Year[2013] Adult Volleyball League. As a participant, I recognize and understand the risks that are inherent in participating in this sporting activity. Acknowledging these risks, whether known or unknown, I hereby assume the risks of property damage, injury, illness or death associated with participation in this activity; I voluntarily agree to release the City of Bellevue, its employees, representatives, volunteers and agents from any and all liability that may arise in connection with this activity; I agree that the terms hereof shall serve as an Assumption of Risks and Release for my heirs, estate, executor, administrator, assignees, guardians and for all members of my family; I hereby waive any and all rights and claims for injuries, damage or loss. I further agree to adhere to the rules and regulations established by the Bellevue Parks and Community Services Department. In addition, I give my permission to have photos/videotapes taken without recompense during the City of Bellevue activities and for publicity purposes. **CAUTION: By signing the signature line, I acknowledge that I have read this Waiver and Release, that I understand its contents and warning and that I knowingly and voluntarily agree to its terms.**

**Player's signature is required before playing.**

Printed Name	Phone(s)	Residence Address	City	Zip	Resident?	Signature	Date
1							
2							
3							
4							
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11							
12							